

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000001721

FILED
Jan 06, 2009
Secretary of State

Entity Name: L & J REAL PROPERTY HOLDINGS, LLC

Current Principal Place of Business:

25 FOX VALLEY
ARNOLD, MO 63010

New Principal Place of Business:

900 JEFFCO BLVD.
ARNOLD, MO 63010

Current Mailing Address:

25 FOX VALLEY
ARNOLD, MO 63010

New Mailing Address:

900 JEFFCO BLVD.
ARNOLD, MO 63010

FEI Number: 20-2125143

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, RAMONA L
#25 FOX VALLEY
ARNOLD, MO, FL 63010 US

Name and Address of New Registered Agent:

JONES, RAMONA L
3293 SUNSET KEY
PUNTA GORDA, FL 33955 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: RAMONA LYNN JONES

01/06/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MM () Delete
Name: JONES, RAMONA L
Address: #25 FOX VALLEY
City-St-Zip: ARNOLD, MO 63010

Title: MM () Delete
Name: JONES, LLOYD E
Address: #25 FOX VALLEY
City-St-Zip: ARNOLD, MO 63010

Title: MM () Delete
Name: LEIDHOLDT, STEVE
Address: #25 FOX VALLEY
City-St-Zip: ARNOLD, MO 63010

ADDITIONS/CHANGES:

Title: MM (X) Change () Addition
Name: JONES, RAMONA L
Address: 900 JEFFCO BLVD.
City-St-Zip: ARNOLD, MO 63010

Title: MM (X) Change () Addition
Name: JONES, LLOYD E
Address: 900 JEFFCO BLVD.
City-St-Zip: ARNOLD, MO 63010

Title: MM (X) Change () Addition
Name: LEIDHOLDT, STEVE
Address: 900 JEFFCO BLVD.
City-St-Zip: ARNOLD, MO 63010

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: RAMONA LYNN JONES

MM

01/06/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date